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CONFIRMATION NO. 5356

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APPLICANTS

Anthony Kam Chuen Chan, Ancaster, CANADA;
 Jeffrey I. Weitz, Ancaster, CANADA;
 Jack Hirsh, Burlington, CANADA;
 Paul Tressel, Hamilton, CANADA;
 Roy Berry, Burlington, CANADA;

**** CONTINUING DATA *******

This application is a 371 of PCT/CA04/01497 08/12/2004
 which claims benefit of 60/494,120 08/12/2003

**** FOREIGN APPLICATIONS *******

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ****
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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance Initials	CANADA	12	25

ADDRESS

McCarthy Tetrault LLP
 Box 48
 Suite #4700 Toronto Dominion Bank Tower
 TORONTO, ON M5K 1E6
 CANADA

TITLE

Methods for preventing neurological events

FILING FEE RECEIVED 1520	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit